2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001637

Entity Name: RBS ASSET FINANCE, INC.

FILED Mar 29, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
71 S WACKER DR 28TH FLOOR CHICAGO, IL 60605				71 S WACKER DR 28TH FLOOR CHICAGO, IL 60606		
Current Mailing Address:				New Mailing Address:		
71 S WACKER DR 28TH FLOOR CHICAGO, IL 60605				71 S WACKER DR 28TH FLOOR CHICAGO, IL 60606		
FEI Number: 13-3396018 FEI Number Applied For ()			FEI Nun	Number Not Applicable () Certificate of Status Desired ()		
Name and	Address of C	Current Registered Agent:		Name and	Address of	New Registered Agent:
1201 HAYS TALLAHAS The above	S STREET SSEE, FL 323		ırpose o	f changing i	ts registered	office or registered agent, or both,
SIGNATUR	RE:					
	Electror	nic Signature of Registered Ager	nt			Date
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	GODIER, JOHN 101 PARK AVE NEW YORK, N	NUE Y 10178) Delete THLEEN DR, 28TH FL		Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	WILLE, ROBI 71 S. WACKE CHICAGO, IL AS (GRANT, CATI	ER DR., 28TH FL. . 60606 (X) Change()Addition HERINE STREET, RCE-150
Title: Name: Address: City-St-Zip:	,) Delete RD DR, 28TH FL		Title: Name: Address: City-St-Zip:	P&D (BOULDEN, L	(X) Change () Addition AIRD ER DR, 28TH FL
Title: Name: Address: City-St-Zip:	BRITTON, JER	PKWY, STE 300		Title: Name: Address: City-St-Zip:	O'CONNOR,	ER DR., 28TH FL.
Title: Name: Address: City-St-Zip:	V (CARR, MAURE 71 S WACKER CHICAGO, IL 6	DR, 28TH FL		Title: Name: Address: City-St-Zip:	(() Change () Addition
Title: Name: Address: City-St-Zip:	()) Delete		Title: Name: Address: City-St-Zip:	COSTA, CLA	IS PLAZA, RLC300

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CATHERINE GRANT AS 03/29/2007